

MEMBERSHIP APPLICATION FORM

This form should be completed and returned to your club secretary, to be forwarded to the Sub-Aqua Association head office.



Date

Dive club name

Dive club number

Membership number

New club member

☐

Student starter pack required

☐

Existing club member

☐

Note: It is a requirement for new members below club diver to purchase the SAA "Student Starter Pack"

Surname

First name

Date of birth

Sex-

Male

☐

Female

☐

Address

Town

County

Postcode

Country

E-Mail

Telephone: Home

Mobile

Office use only

Rec'd

Ent'd

Diving qualifications-

Social

☐

Trainee

☐

Snorkeller

☐

Elementary diver

☐

Open water diver

☐

Club diver

☐

Dive leader

☐

Dive supervisor

☐

Dive master

☐

Instructor qualifications-

Snorkel

☐

Assistant

☐

Club

☐

Open water

☐

Regional

☐

National

☐

How many years have you been diving?

0-1

☐

1-2

☐

2-4

☐

5+

☐

Are you a member of any other diving organisation/s?

Yes

☐

No

☐

If yes please state